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DATE: February 25, 2009

PTO IDENTIFIER: Application Number 10/773,989-Conf. #7098
Patent Number

Inventor: Robert K. BARR et al.

MESSAGE TO: Examiner Connie P. Johnson - Group Art Unit 1795

FAX NUMBER: (571) 273-8300

FROM: John J. Piskorski
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Attorney Dkt. #: 52183

PAGES (Including Cover Sheet): 5CONTENTS: Notice of Appeal From the Primary Examiner to the Board of Patent Appeals and
Interferences (3 pages)
Certificate of Facsimile Transmission (1 page)

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PTO/SB/97 (08-04)

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Application No. (if known): 10/773,989

Attorney Docket No.: 52183

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Notice of Appeal From the Primary Examiner to the Board of Patent Appeals and Interferences (3 pages)

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FEB 25 2009

Practitioner's Docket No. 52183

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Robert K. BARR et al.

Serial No.: 10/773,989

Group No.: 1795

Filed: February 6, 2004

Examiner: Connie P. Johnson

For: IMAGING METHOD

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES (37 C.F.R. 1.191)

NOTE: An appeal may be based on one rejection in a prior application and one rejection in a continuing application. Notice of Oct. 10, 1997, 62 F.R. 53131, at 53167.

NOTE: There is no requirement for a notice of appeal to: (1) be signed; or (2) identify the appealed claims. Notice of Oct. 10, 1997, 62 F.R. 53131, at 53167.

Applicant hereby appeals to the Board from the decision of the Primary Examiner, mailed December 5, 2008, finally rejecting claims 1, 2, 4-7, 10, 19 and 20.

The item(s) checked below are appropriate:

1. STATUS OF APPLICANT

This application is on behalf of

☒ other than a small entity.☐ a small entity.

A statement:

☐ is attached.☐ was already filed.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

FACSIMILE

- ☒ transmitted by facsimile to the Patent and Trademark Office.


SignatureDate: 2/25/2009
02/25/2009 HMARZ11 00000043 181850 10773989Deanna M. Rivemider
(type or print name of person certifying)

01 FC:1401 540.00 DA

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2. FEE FOR FILING NOTICE OF APPEAL

Pursuant to 37 C.F.R. 1.17(b), the fee for filing the Appeal Brief is:

☐ small entity \$255.00

☒ other than a small entity \$540.00

Notice of Appeal fee due \$ 540.00

3. EXTENSION OF TERM

NOTE: The time periods set forth in 37 C.F.R. 1.191 are subject to the provision of § 1.136 for patent applications. 37 C.F.R. 1.191(d). (But see 37 C.F.R. 1.645 for extension of time in interference proceedings and 37 C.F.R. 1.550(c) for extension of time in reexamination proceedings).

(complete (a) or (b), as applicable)

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for the total number of months checked below:

| | Extension (months) | Fee for other than <u>small entity</u> | Fee for <u>small entity</u> |
|--------------------------|-----------------------|---|--------------------------------|
| <input type="checkbox"/> | one month | \$ 120.00 | \$ 60.00 |
| <input type="checkbox"/> | two months | \$ 450.00 | \$225.00 |
| <input type="checkbox"/> | three months | \$1,020.00 | \$510.00 |
| <input type="checkbox"/> | four months | \$1,590.00 | \$795.00 |

Fee: \$ _____

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

(a) ☐ An extension for _____ months has already been secured, and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

or

(b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

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4. TOTAL FEE DUE

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The total fee due is:

Notice of Appeal fee \$ 540.00

Extension fee (if any) \$ _____

TOTAL FEE DUE \$ 540.00

5. FEE PAYMENT

☐ Attached is a check in the sum of \$ _____☒ Charge Account No. 18-1850 the sum of \$ 540.00

A duplicate of this transmittal is attached.

6. FEE DEFICIENCY

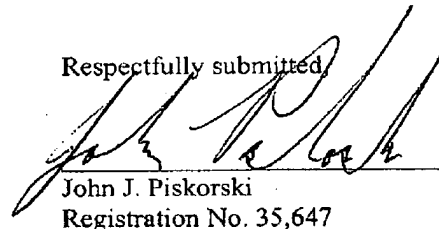
NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in resuming the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, 1065 O.G 31-33.

☒ If any additional extension and/or fee is required, this is a request therefor and to charge Account No. 18-1850.

AND/OR

☒ If any additional fee for claims is required, charge Account No. 18-1850.

Respectfully submitted,


John J. Piskorski
Registration No. 35,647

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